#### Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

# IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

| Wisconsin   |  |
|---|--|
| State (An Eligible Telecommunications Carrier (ETC) must provide                | de a certification form for each state in which it provides Lifeline service). |
| 330860  | Chequamegon Communications Coop Inc.   |
| Study Area Code(s) (SAC)  | ETC Name(s)  |
|   | Norvado  |
| Holding Company Name(s)   | DBA, Marketing or Other Branding Name(s)                                       |
| Affiliated ETCs (include names and SACs, attach additional sheets if necessary) | Norvado Inc 339003   |

Provide a list of all ETCs that are affiliated with the reporting ETC. Affiliation shall be determined in accordance with section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification

#### Section 1: All ETCs MUST COMPLETE SECTION 1- Initial Certification

I certify that the company listed above has certification procedures in place either to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. Initial

# Section 2: All ETCs MUST COMPLETE SECTION 2- Annual Recertification Do not leave empty columns. If an ETC has nothing to report in a column, enter a zero.

| A   | В  | С   |
|---|--|---|
| Number of<br>Subscribers Claimed on<br>February FCC Form(s) 497<br>of current Form 555<br>calendar year | Number of Lines Claimed on<br>February FCC Form(s) 497<br>of current Form 555<br>calendar year provided to<br>Wireline Resellers | Number of Subscribers claimed<br>on the February FCC Form(s)<br>497 that were initially enrolled in<br>current Form 555 calendar year |
| 298   | 0  | 11  |

Initial the certifications below that apply to your ETC and complete the tables corresponding to the certification below. Depending on the state, BOTH CERTIFICATION A AND B MAY APPLY.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart below. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. Initial

| D  | E  | F =D-E                                      | G   | H = (F+G)  | I  |
|--|--|---|---|--|--|
| Number of<br>Subscribers ETC<br>Contacted Directly<br>to Recertify<br>Eligibility Through<br>Attestation | Number of<br>Subscribers<br>Responding to<br>ETC Contact | Number of Non-<br>Responding<br>Subscribers | Number of<br>Subscribers<br>Responding That<br>They Are No<br>Longer Eligible | Number of Subscribers De-enrolled or Scheduled to be De- Enrolled as a Result of Non-Response or Ineligibility | Number of<br>Subscribers Who<br>De-Enrolled Prior<br>to Recertification<br>Attempt |
| 22   | 13   | 9   | 4   | 13   | 0  |

#### AND/OR

In the space below, please list the program eligibility data sources, such as ETC access to a state database and/or notice of eligibility from the state Lifeline administrator or the Universal Service Administrative Company (USAC), and indicate for which qualifying programs (e.g., SNAP, SSI) these sources are used to verify subscriber eligibility. If any of subscribers are subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in columns D through I as appropriate and not in columns J through L.

B) I certify that the company listed above has procedures in place to re-certify consumer eligibility by relying on

State of Wisconsin database

Provided in the chart below. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. Initial

| J  | K   | L  |
|--|---|--|
| Number of Subscribers<br>Whose Eligibility was<br>Reviewed By State<br>Administrator<br>ETC Access to Eligibility<br>Data or by USAC | Number of Subscribers De-Enrolled or Scheduled to be De-Enrolled as a Result of Finding of Ineligibility by State Administrator, ETC Access to Eligibility Data or USAC | Number of Subscribers Who<br>De-Enrolled Prior to<br>Recertification Attempt |
| 329  | 22  | 33   |

#### OR

C) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the Smpany named above. I am authorized to make this certification for the Study Area(s) listed above. Initial

Section 3: ALL ETCS MUST COMPLETE SECTION 3 – De-enroll percentage What is the percentage of subscribers de-enrolled for this ETC?

| M   | N   | 0   | P = N + O  | $\mathbf{Q} = ((\mathbf{P} \div \mathbf{M}) \star 100)$  |
|---|---|---|--|--|
| Number of<br>Subscribers Claimed<br>on February FCC<br>Form(s) 497<br>(From Column A) | Number of Subscribers De- Enrolled or Scheduled to be De- Enrolled as a Result of Non-Response or Ineligibility (From Column H) | Number of Subscribers De- Enrolled or Scheduled to be De- Enrolled as a Result of a Finding of Ineligibility  (From Column K) | Total Number of<br>Subscribers De-Enrolled<br>or Scheduled to be De-E<br>nrolled | Percentage of Subscribers De-Enrolled or Scheduled to be De-Enrolled that were Claimed on the February FCC Form(s) 497 |
| 298   | 13  | 22  | 35   | 11.74  |

Section 4: ALL ETCS MUST COMPLETE APPROPRIATE CHECK BOX; PRE-PAID ETCS MUST COMPLETE ALL OF SECTION 4

| Is the ETC Pre-   | Paid?   |
|-------------------|---|
| Yes No            | (A Pre-Paid ETC does not assess or collect a monthly fee from its Lifeline subscribers) |
| If yes, record th | e number of subscribers de-enrolled for non-usage by month in column S below.           |

Non-Usage Results Applicable to Pre-Paid ETCs:

| R         | S                                     |
|-----------|---------------------------------------|
| Month     | Subscribers De-Enrolled for Non-Usage |
| January   | n/a                                   |
| February  |                                       |
| March     |                                       |
| April     |                                       |
| May       |                                       |
| June      |                                       |
| July      |                                       |
| August    |                                       |
| September |                                       |
| October   |                                       |
| November  |                                       |
| December  |                                       |

## Signature Block: ALL ETCS MUST COMPLETE SIGNATURE FIELDS

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above.

| Signed,  |  |
|--|--|
| James iv . Londery   | James Rondeau  |
| Signature of Officer   | Printed Name of Officer  |
| Secretary/Treasurer  | 1/30/2014  |
| Title of Officer   | Date   |
| Heidi McKinney   | 715-798-3303   |
| Person Completing this Certification Form  | Contact Phone Number   |
|  |  |
| ETC  | Identification   |
| SAC  | ETC Name   |
| 330860   | Chequamegon Communications Cooperative, Inc.   |
| 33333  | Onequamogen Continuence Cooperato, inc.  |
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| Holding  | Company Name(s)  |
| SAC  | Holding Company Name   |
| n/a  | Trouble Company  |
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| DBA, Marketing o   | or Other Branding Name(s)  |
| SAC  | Name   |
| 330860   | Norvado  |
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**Affiliated ETCs** 

| Affiliated ETCs  |  |  |  |
|--|--|--|--|
| SAC  | Name   |  |  |
| 339003   | Norvado Inc  |  |  |
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- A. Submit to the Universal Service Administrative Company (USAC) via ONE of the methods below.
  - Submit electronically via USAC's E-File portal. Instructions are available at <u>www.usac.org</u>.
- 2. Fax to (202) 776-0080.
- 3. Email to LiVerifications@usac.org.
- Mail to USAC Low Income Program, Attention: FCC Form 555, 2000 L Street NW, Suite 200, Washington, DC 20036.
- B. Submit to the FCC via the Electronic Comment Filing System in Docket 11-42 at <a href="http://apps.fcc.gov/ecfs/upload">http://apps.fcc.gov/ecfs/upload</a>

#### Information Fields:

State

Enter the state for which the eligible telecommunications carrier (ETC) is filing this certification. An ETC must provide a certification form for each state in which it provides Lifeline service. Use a separate *Annual Lifeline Eligible Telecommunications Carrier Certification Form* for each state.

Study Area Code(s) SAC

Enter the six-digit study area code(s) (SAC) for the state for which the certification is filed. An ETC may include multiple SACs on one form only if the ETC has more than one SAC in the state indicated.

ETC Name(s)

Enter the corporate name of the ETC submitting the Annual Lifeline Eligible Telecommunications Carrier Certification Form.

Holding Company Name(s)

Enter the corporate name of the holding company of the ETC.

DBA, Marking or Other Branding Name(s)

Enter all additional names under which the ETC does business, including d/b/a(s) (doing business as) and the names under which the ETC markets or brands its Lifeline service in the

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state reported on this Form.

Affiliated ETCs

Provide a list of all ETCs that are affiliated with the reporting ETC. Affiliation shall be determined in accordance with section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2); see also 47 C.F.R. § 76.1200. Use additional sheets if necessary.

#### Section 1: ALL ETCs MUST COMPLETE SECTION 1.

Section 1 of the Annual Lifeline Eligible Telecommunications Carrier Certification Form requires an officer of an ETC to certify that the ETC verifies consumer eligibility prior to enrolling a consumer in Lifeline by either A) reviewing income and program-based eligibility documentation or B) confirming the consumer's eligibility by relying upon access to a state database and/or notice of eligibility from the Lifeline administrator.

Section 2: ALL ETCs MUST COMPLETE SECTION 2 AND MUST COMPLETE EITHER (1) CERTIFICATIONS A AND/OR B OR (2) CERTIFICATION C. ETCs SHOULD ENTER ZERO INSTEAD OF A BLANK FOR COLUMNS FOR WHICH THERE IS NO RESULT.

Section 2 requires an officer of an ETC to certify either 1) that the ETC has procedures in place to re-certify the continued eligibility of its Lifeline subscribers, and that the ETC has copies of signed certifications, and/or 2) that the ETC has procedures in place to re-certify the continued eligibility of its Lifeline subscribers by consulting a database or that those subscribers were recertified by a Lifeline administrator; or 3) that the ETC did not claim federal low income support for any Lifeline subscribers prior to February of the current Form 555 calendar year. The "current Form 555 calendar year" is the year covered by the recertification results recorded on the Form, not the year in which Form 555 is filed.

Section 2 requires that the results of the ETC's annual recertification be recorded.

All ETCs must complete Columns A, B and C for each state in which they provide Lifeline service.

Column A: Report the number of Lifeline subscribers for which the ETC claimed Lifeline support on its February FCC Form 497 for the current Form 555 calendar year (i.e., the FCC Form 497 for the February data month) for the SAC or SACs listed. If the ETC has more than one SAC in the state covered by this form, the combined total number of subscribers should be entered in Column A. If the ETC did not claim support on its February FCC Form(s) 497, the ETC should enter zero in Column A.

Column B: If the ETC is acting as a wholesaler and provides Lifeline service to wireline resellers pursuant to section 251(c)(4), report the number of such lines provided to resellers. If the ETC does not provide service to wireline resellers, the ETC should enter zero in Column B.

Column C: Report the number of Lifeline subscribers for which the ETC claimed Lifeline support on its February FCC Form 497 for the current Form 555 calendar year that were initially enrolled in Lifeline in that year. For example, for the 2013 Form 555 calendar year, if the carrier enrolled 500 subscribers in January 2013, and all 500 of those subscribers were claimed on the 2013 February FCC Form 497, all 500 of these subscribers would be reported in this column.

#### Recertification Results for Section 2:

An officer of the ETC must initial at least one of the certifications. Depending on the state, both Certification A and B may apply. An ETC must report the results of its recertification process in the chart corresponding to the certification the officer of the ETC has initialed.

Certification A: An officer of the ETC must initial Certification A in Section 2 and complete Columns D-I if the ETC verifies consumer eligibility by reviewing documentation provided by the consumer.

Certification B: An officer of the ETC must initial Certification B in Section 2 and complete Columns J-L if the ETC verifies consumer eligibility by relying on information provided by a database, state Lifeline administrator or USAC in those instances where the ETC has elected to use USAC to perform the recertification. (Note that consumer documentation does not qualify as a database or state Lifeline administrator.) In the blank, provide the data source or sources used to verify consumer eligibility. Data sources can include, for example, the name of a state or federal database an ETC queried to confirm consumer eligibility or a state Lifeline administrator that provided notice of consumer eligibility to the ETC. ETCs must also indicate for which qualifying programs (e.g., SNAP, SSI) each source was used to verify consumer eligibility.

Certification A and B: An officer of an ETC that uses multiple methods of confirming ongoing consumer eligibility should complete both Certification A and B and complete columns D-L. For example, an ETC that uses a state database to verify eligibility of consumers who qualify because they receive benefits under the SNAP program, but reviews documentation of eligibility provided by consumers who qualify under other programs or based on their income, should complete both Certification A and B in Section 2.

Certification C: An officer of the ETC must initial Certification C if the ETC did not claim federal Low Income support for any Lifeline subscribers for FCC Form 497 data for the current Form 555 calendar year. The ETC officer must provide the current year in the space provided.

Column D: Report the number of Lifeline subscribers the ETC contacted directly to obtain re-certification of eligibility. Enter zero if the ETC relied solely on methods other than direct

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contact with subscribers (e.g., consulting a state database or relying on a Lifeline administrator) to re-certify eligibility.

Column E: Report the number of Lifeline subscribers that responded to the ETC's request to re-certify their eligibility for Lifeline. This number could be equal to the number in Column D (if every subscriber contacted responded) or less than the number reported in Column D (if not every subscriber contacted responded). Enter zero if the ETC relied solely on methods other than direct contact with subscribers (e.g., consulting a state database or relying on a Lifeline administrator) to re-certify eligibility.

Column F: Report the number of subscribers who did not respond to the ETC's request to recertify eligibility. This number should equal the number reported in Column D minus the number reported in Column E. Enter zero if the ETC relied solely on methods other than direct contact with consumers (e.g., consulting a state database or relying on a Lifeline administrator) to re-certify eligibility.

Column G: Report the number of subscribers contacted who responded and indicated that they are no longer eligible. Do not include in Column F any consumers who failed to respond to the ETC's contact. Enter zero if the ETC relied solely on methods other than direct contact with subscribers (e.g., consulting a state database or relying on a Lifeline administrator) to recertify eligibility.

Column H: Report the number of subscribers that have been, or are scheduled to be, deenrolled. A subscriber that fails to re-certify continued eligibility must be de-enrolled from Lifeline pursuant to 47 C.F.R. §54.410(f)(5). The number reported in Column G should include the number of subscribers who did not respond to the ETC's request to re-certify eligibility, as reported in Column E, plus the number of subscribers who responded and indicated that they are no longer eligible, as reported in Column F. Enter zero if the ETC relied solely on methods other than direct contact with subscribers (e.g., consulting a state database or relying on a Lifeline administrator) to re-certify eligibility.

Column I: Report the number of subscribers – of those contacted directly by the ETC in an attempt to re-certify eligibility – who de-enrolled from Lifeline prior to the ETC's attempt to re-certify continued eligibility. This number should include all subscribers who de-enrolled for any reason, including those subscribers that discontinued Lifeline service with the ETC on their own initiative and those that the ETC de-enrolled from Lifeline(for example, those deenrolled for non-usage). Enter zero if the ETC relied solely on methods other than direct contact with subscribers (e.g., consulting a state database or relying on a Lifeline administrator) to re-certify eligibility. ETCs should be careful not to double count these subscribers in column L.

Column J: Report the number of consumers for which the ETC relied on a source other than direct contact with the subscriber to confirm continued eligibility. An ETC can rely on a state or national database to confirm a subscriber continued to be eligible for Lifeline. An ETC can

also rely on a Lifeline administrator to confirm consumer eligibility or on USAC in those instances where the ETC has elected to utilize USAC to perform the recertification. An ETC must report the number of subscribers for which it relied on either of these methods (confirmation through database or Lifeline administrator) in Column J. ETCs electing to use USAC to perform their recertification may not also attempt to recertify subscribers on their own. If any of subscribers are subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in columns D through I as appropriate and not in column J. ETCs should be careful not to double count these subscribers. Enter zero if the ETC relied solely on direct contact with subscribers to re-certify eligibility.

Column K: Report the number of subscribers found to be ineligible via confirmation through a database, from a Lifeline administrator, that were de-enrolled, or are scheduled to be deenrolled. That is, of the number of subscribers for which the ETC or Lifeline administrator utilized a database to attempt to confirm eligibility or were determined by USAC to be ineligible, how many were found to be ineligible. If any of these subscribers are subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in columns D through I as appropriate and not in column K. ETCs should be careful not to double count these subscribers. ETCs electing to use USAC to perform their recertification may not also attempt to recertify subscribers on their own. Enter zero if the ETC relied solely on direct contact with subscribers to re-certify eligibility.

Column L: Report the number of subscribers – of those for which the ETC attempted to verify eligibility via a database or through a Lifeline administrator – who de-enrolled from Lifeline prior to the ETC's attempt to re-certify continued eligibility. This number should include all subscribers who de-enrolled for any reason, including those subscribers that discontinued Lifeline service with the ETC on their own initiative and those that the ETC de-enrolled from Lifeline for reasons unrelated to the re-certification process (for example, those de-enrolled for non-usage). ETCs should be careful not to double count these subscribers in column I. ETCs electing to use USAC to perform their recertification may not also attempt to recertify subscribers on their own. Enter zero if the ETC relied solely on direct contact with consumers to re-certify eligibility.

Section 3: ALL ETCS MUST COMPLETE SECTION 3. ETCs SHOULD ENTER ZERO INSTEAD OF A BLANK FOR COLUMNS FOR WHICH THERE IS NO RESULT

Section 3 requires the ETC to calculate the percentage of de-enrolled subscribers for the ETC based on the recertification results entered in Columns A-L in Section 2.

Column M: Enter the number of subscribers claimed on February FCC Form(s) 497 for the current calendar year. This number should match the number entered in Column A. If the ETC entered zero in Column A, it should also enter zero in Column M.

See Wireline Competition Bureau Provides Guidance Regarding the 2013 Lifeline Recertification Process, Public Notice, DA 13-1188 at 4, n.23 (rel. May 22, 2013).

Column N: Enter the number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility. This number should match the number entered in Column H. If the ETC entered zero in Column H, it should also enter zero in Column N.

Column O: Enter the number of customers de-enrolled or scheduled to be de-enrolled as a result of a finding of ineligibility. This number should match the number entered in Column K. If the ETC entered zero in Column K, it should also enter zero in Column O.

Column P: Enter the total number of customers de-enrolled or scheduled to be de-enrolled by adding Columns N and O. If Columns N and O contain zeros, then enter zero in Column P.

Column Q: Enter the percentage of subscribers de-enrolled or scheduled to be de-enrolled that were claimed on the February FCC Form(s) 497 by dividing Column P by Column M and multiplying the result by 100.

Section 4: ALL ETCS MUST COMPLETE APPROPRIATE CHECK BOX; PRE-PAID ETCS MUST COMPLETE ALL OF SECTION 4

Section 4 requires the ETC to select whether or not the ETC is a pre-paid Lifeline service provider. If the ETC selects yes, the ETC must report by month the number of Lifeline customers de-enrolled as a result of non-usage. 47 C.F.R. §54.405(e)(3) requires ETCs that do not assess or collect a monthly fee from their subscribers to de-enroll subscribers who do not use their Lifeline service for 60 consecutive days plus a 30 day period after notice of potential de-enrollment for non-use is provided. ETCs that do not assess or collect a monthly fee from their Lifeline customers must complete Section 4.

Column S: Report the number of subscribers de-enrolled for non-usage by month.

## Signature Fields

An ETC is required to complete the Signature Fields for the Form to be considered complete. By doing so, the ETC certifies that the company is in compliance with all federal Lifeline certification procedures.

Signature of Officer

Provide the signature of an officer of the ETC who is authorized to make the certifications included in the *Annual Lifeline Eligible Telecommunications Carrier Certification Form* for the SAC(s) listed on the *Form*.

Printed Name of Officer

Provide the name of the ETC officer who signed the Annual Lifeline Eligible

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Telecommunications Carrier Certification Form.

Title of Officer

Provide the title of the ETC officer who signed the Annual Lifeline Eligible Telecommunications Carrier Certification Form.

Date

Provide the date the ETC officer signed the Annual Lifeline Eligible Telecommunications Carrier Certification Form.

Person Completing This Certification Form

Provide the name of the ETC employee who populated the form with the data submitted by the ETC.

Contact Phone Number

Provide the phone number of the ETC employee who completed the form.

Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

#### PRIVACY ACT AND PAPERWORK REDUCTION ACT STATEMENTS

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your certification may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation, or order. In certain cases, the information in your certification may be disclosed to the Department of Justice or a court or adjudicative body when a) the FCC; or b) any employee of the FCC; or c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

We have estimated that this collection of information will take 15 hours annually. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-0819). We will also accept your PRA comments if you send an e-mail to PRA@fcc.gov.

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Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0819.

THIS NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. SECTION 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.